

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

FEC IDENTIFICATION NUMBER ▼

C C00343459

Check If ☒ 24-hour report ☐ 48-hour report☐ New report ☒ Amends report filed onMM / DD / YYYY
05 / 04 / 2012

Full Name (Last, First, Middle Initial) of Payee

Majority Strategies

Date

MM / DD / YYYY
05 / 04 / 2012

Mailing Address 135 Professional Drive

Suite 104

Amount

12000.00

City

Ponte Vedra Beach

State

FL

Zip Code

32082

Transaction ID : V3AEB27050F882BE1ECD

Purpose of Expenditure
Printed AdvertisingCategory/
Type

Office Sought:

☒ House

State: IN

☐ Senate

District: 05

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

John P. McGoff

Calendar Year-To-Date Per Election
for Office Sought

12000.00

Disbursement For: ☒ Primary☐ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

MM / DD / YYYY

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

12000.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

12000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DR. William Herrington

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 07 / 2012